

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 05, 2003 8:00 am
Secretary of State

09-05-2003 90106 001 ***550.00

0025345 AV

DOCUMENT # P94000002079

1. Entity Name

ARTISTIC DESIGN SOURCE, INC.



Principal Place of Business

**1504 HARRISON STREET
HOLLYWOOD FL 33020
US**

Mailing Address

**1504 HARRISON STREET
HOLLYWOOD FL 33020
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0459236

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**TUDZAROV, LOUISE E
345 W OAKLAND PARK BLVD
FT LAUDERDALE FL 33311**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAMSEY, JANE D 1504 HARRISON STREET HOLLYWOOD FL 33020	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAMSEY, JAMES G 1504 HARRISON STREET HOLLYWOOD FL 33-020.	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JANE D. RAMSEY

8/8/03

954-921-9929

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E034 (4/03)

Attachment



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 18, 2003

ARTISTIC DESIGN SOURCE, INC.
1504 HARRISON STREET
HOLLYWOOD, FL 33020 US

SUBJECT: ARTISTIC DESIGN SOURCE, INC.
Ref. Number: P94000002079

We have received your document for ARTISTIC DESIGN SOURCE, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Please be advised that we are unable to honor your request for waiver, or reduction, of the late fees, or penalties. The corporation failed to respond by the due date, as a result, the corporation has been administratively dissolved or revoked. You will need to reinstate the corporation and pay all applicable fees.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Marquitta Williams
Document Specialist

Letter Number: 503A00046755

9/3/03 , 2:30 pm

I spoke with Ms. Williams and she advised to pay the \$550.00 by September 10, 2003. If this is received in your office before 9/10/03 my corporation will not be dissolved or revoked. I am enclosing the originally sent Doc. # P94000002079 with my check for \$550.00. Thank you very much,

Jane D. Ramsey
President, Artistic Design Source, Inc.